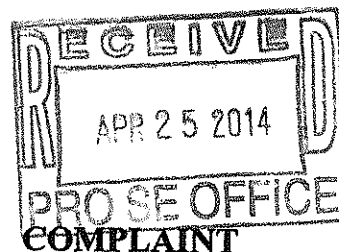


UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Evelyn Graham
446 West 26th Street #5F
New York, NY 10001
(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Macy's, Inc - AKA Macy's Retail Holdings, Inc.
151 West 34th Street
New York, NY 10001
(In the space above enter the full name(s) of the defendant(s).
If you cannot fit the names of all of the defendants in the space
provided, please write "see attached" in the space above and
attach an additional sheet of paper with the full list of names.
Typically, the company or organization named in your charge
to the Equal Employment Opportunity Commission should be
named as a defendant. Addresses should not be included here.)



**COMPLAINT
FOR EMPLOYMENT
DISCRIMINATION**

Jury Trial: ☒ Yes ☐ No
(check one)

This action is brought for discrimination in employment pursuant to: (check only those that apply)

_____ Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).
NOTE: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue Letter from the Equal Employment Opportunity Commission.

_____ Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 - 634.
NOTE: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.

☒ Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 - 12117.
NOTE: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue Letter from the Equal Employment Opportunity Commission.

_____ New York State Human Rights Law, N.Y. Exec. Law §§ 290 to 297 (age, race, creed, color, national origin, sexual orientation, military status, sex, disability, predisposing genetic characteristics, marital status).

_____ New York City Human Rights Law, N.Y. City Admin. Code §§ 8-101 to 131 (actual or perceived age, race, creed, color, national origin, gender, disability, marital status, partnership status, sexual orientation, alienage, citizenship status).

I. Parties in this complaint:

- A. List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Evelyn Graham
 Street Address 446 West 26th Street Apt #5 F
 County, City Manhattan, New York
 State & Zip Code New York, 10001
 Telephone Number (917) 257-0377

- B. List all defendants' names and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant Name Macy's, Inc - AKA Macy's Retail Holdings, Inc
 Street Address 151 West 34th Street
 County, City Manhattan, NY
 State & Zip Code New York, 10001
 Telephone Number (212) 494-3330 or (212) 695-4400

- C. The address at which I sought employment or was employed by the defendant(s) is:

Employer Macy's, Inc - AKA - Macy's Retail Holdings, Inc.
 Street Address 151 West 34th Street
 County, City Manhattan, New York
 State & Zip Code New York, 10001
 Telephone Number (212) 695-4400 or (212) 494-3330

II. Statement of Claim:

State as briefly as possible the facts of your case, including relevant dates and events. Describe how you were discriminated against. If you are pursuing claims under other federal or state statutes, you should include facts to support those claims. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. The discriminatory conduct of which I complain in this action includes: (check only those that apply)

- ☐ Failure to hire me.
☐ Termination of my employment.
☒ Failure to promote me.
☒ Failure to accommodate my disability.
☒ Unequal terms and conditions of my employment.



Retaliation.

Other acts (specify): _____

Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.

B. It is my best recollection that the alleged discriminatory acts occurred on: 5/30/2013
Date(s)

C. I believe that defendant(s) (check one):



is still committing these acts against me.

is not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (check only those that apply and explain):

☐ race _____ ☐ color _____

☐ gender/sex _____ ☐ religion _____

☐ national origin _____

☐ age. My date of birth is _____ (Give your date of birth only if you are asserting a claim of age discrimination.)

☒ disability or perceived disability, Arthritis and Bipolar Depression (specify)

E. The facts of my case are as follow (attach additional sheets as necessary):

- (1) - No reasonable accommodations were set up for my return to work
- (2) Harassed me financially by denying me access to paychecks, 401K, etc.
- (3) Continued to harass me after I filed my EEOC claim
- (4) Did not accept my resignation on 11/25/13
- (5) Never called me to meet HR managers in charge of ADA after 2012
- (6) Allowed managers and staff to take advantage of me for 5 yrs
- (7) allowed my paychecks to be remain incorrect for most of 2008.
- (8) Tried to stop payment of cash pension and unemployment. See pg 10

Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, the New York State Division of Human Rights or the New York City Commission on Human Rights.

III. Exhaustion of Federal Administrative Remedies:

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding defendant's alleged discriminatory conduct on: June, 11th, 2013 (Date).

B. The Equal Employment Opportunity Commission (check one):

☒ has not issued a Notice of Right to Sue letter.

☐ issued a Notice of Right to Sue letter, which I received on 1/31/14 (Date).

Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.

C. Only litigants alleging age discrimination must answer this Question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding defendant's alleged discriminatory conduct (check one):

☐ 60 days or more have elapsed.

☐ less than 60 days have elapsed.

IV. Relief:

WHEREFORE, plaintiff prays that the Court grant such relief as may be appropriate, including injunctive orders, damages, and costs, as follows:

Compensatory damages - \$151K - Mental Anguish
Emotional Distress - \$350K for abuse/neglect / Punitive damages - 1.5 mil
Pain & Suffering & income from 11/3 - Present / ADA discrimination - \$200K reasonable
(Describe relief sought, including amount of damages, if any, and the basis for such relief.)
accommodations / Gross Negligence - refused to accept resignation, allowed argmt
to harass me on every level / Refused to treat me properly = \$250K
Payment of Court fees - \$150K Criminal
Souctions

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 24th day of April, 2014.

Signature of Plaintiff

Address

Judy Graham - Evelyn Graham
446 West 26th Street
APT #5F
New York, NY 10001

Telephone Number

Fax Number (if you have one)

(917) 257-0377



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
New York District Office

33 Whitehall Street, 5th Floor
New York, NY 10004-2112
(212) 336-3620
TTY (212) 336-3622
FAX (212) 336-3625

VIA U.S. MAIL

Evelyn D. Graham
446 West 26th Street, Apt. 5F
New York, NY 10001

Re: Evelyn D. Graham v. Macy's, Inc.
EEOC Charge No: 520-2013-02215

Dear Ms. Graham:


The Equal Employment Opportunity Commission ("EEOC" or "Commission") has reviewed your charge according to our charge prioritization procedures. These procedures, which are based on a reallocation of the Commission's staff resources, apply to all open charges in our inventory and call for us to focus our limited resources on those cases that are most likely to result in findings of violations of the laws we enforce. In accordance with these procedures, we have evaluated your charge based upon the evidence provided.

You allege that you were subjected to retaliation and discriminated against by Macy's, Inc. ("Respondent") on the basis of your disability. Respondent's position statement has been previously shared with you. Your rebuttal to this position statement has been received and reviewed.

Based upon a review of information and documents submitted by you and the Respondent, the Commission is unable to conclude that the information establishes a violation of Federal law on the part of the Respondent. Although you may disagree with this determination, it is very unlikely that EEOC would find a violation if it invested additional resources. Therefore, the EEOC has decided not to further pursue its investigation of this charge and no further action will be taken by the Commission regarding this matter.

Enclosed is your Notice of Dismissal and Right to Sue. This determination is final. If you wish to pursue this matter on your own, you may file a lawsuit against the Respondent named in your charge in Federal District Court **within 90 days of receipt of your Notice of Dismissal and Right to Sue**. Please contact Federal Investigator Debra L. Richards at (212) 336-3768 if you have any questions regarding this matter.

Sincerely,



Kevin J. Berry
District Director

1/31/14
Date

Enc.

EEOC Form 161 (11/09)

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

DISMISSAL AND NOTICE OF RIGHTS

To: **Evelyn Graham**
446 West 26th Street
Apt. 5 F
New York, NY 10001

From: **New York District Office**
33 Whitehall Street
5th Floor
New York, NY 10004



On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

EEOC Representative

Telephone No.

520-2013-02215

Debra L. Richards,
Investigator

(212) 336-3768

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:



The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.



Your allegations did not involve a disability as defined by the Americans With Disabilities Act.



The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.



Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge



The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.



The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.



Other (briefly state)

- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit **must be filed WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission

Enclosures(s)

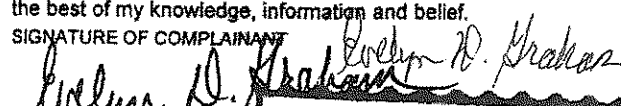

Kevin J. Berry
Kevin J. Berry,
District Director

1/31/14
 (Date Mailed)

cc:

Sarah J. Westover
Legal Assistant
MACY'S CORPORATE SERVICES INC
611 Olive Street 10th Floor
Saint Louis, MO 63101

EEOC Form 5 (11/08)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC 520-2013-02215	
New York State Division Of Human Rights and EEOC State or local Agency, if any			
Name (indicate Mr., Ms., Mrs.) Ms. Evelyn Graham		Home Phone (Incl. Area Code) (917) 257-0377	Date of Birth 04-21-1963
Street Address City, State and ZIP Code 446 West 26th Street, Apt. 5F, New York, NY 10001			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name MACY'S, INC.		No. Employees, Members 500 +	Phone No. (Include Area Code) (212) 494-3330
Street Address City, State and ZIP Code 151 WEST 34TH STREET, NEW YORK, NY 10001			
Name 		EQUAL EMPLOYMENT OPPORTUNITY COMMISSION NEW YORK DISTRICT OFFICE [Stamp: JUL 23 2013] DATE RECEIVED	
Street Address City, State and ZIP Code 		Phone No. (Include Area Code) 	
DISCRIMINATION BASED ON (Check appropriate box(es).) <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest 05-30-2013 <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)). <p>I have a disability. Because of this, I have been discriminated against and subjected to retaliation.</p> <p>I began working for Macy's on October 17, 2007 and Demetrios Group on March 17, 2008 as a Bridal Consultant. I am currently on a leave of absence due to stress, pain, and sanity.</p> <p>I have been continuously acknowledged by my employer as a hard worker, and as one who gains a substantial amount of business for the company. However, because of this, I have been subjected to harassment and am being taken advantage of. Furthermore, my employer has failed to accommodate me as requested.</p> <p>I am currently a part-time employee. Due to my disability, I am unable to stand or walk for extended periods of time, as ordered by my physician. However, because of my exceptional sales performance, my employer has continuously requested that I fill in for co-workers when they are absent. This initially lead to my working full-time hours, as well as standing and walking for extended periods of time during my shift(s). Also, there have been numerous times when the commissions that I was suppose to get for bridal products I sold, were unjustly taken away from me. Furthermore, I have been denied my due breaks on various different occasions. This denial of breaks has exacerbated my already poor circumstances.</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT  SUBSCRIBED AND SWORN TO BEFORE ME THIS 14 TH DAY OF JULY, 2013	
Date 7/19/13 Charging Party Signature 		Notary Public - State of New York NO. 01V6201324 Qualified in Queens County My Commission Expires 5/22/17	

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: Agency(ies) Charge No(s):

☐ FEPA☒ EEOC

520-2013-02215

New York State Division Of Human Rights

and EEOC

State or local Agency, if any

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):

On April 24th, 2013 I contacted Macy's Employee Connection to find out who I could contact to report that I was being mistreated by Macy's Bridal Consultant, Demetrios staff. The representative gave me the Macy's Third Party Compliance Company, Global Compliance. Upon completion of my call I was given a confirmation number to use if I were to call for a status update. I called a few times to check on the status and was told Macy's had my claim and would contact me. To date, I have not been contacted by anyone from Human Resources or Global Compliance.

I was extremely hurt and upset. It was as if they didn't think I was worth contacting even after knowing that I was a good employee, disabled and abused for 5 years. I also contacted Heidi (Human Resources) at Herald Square who also has not returned my call.

I contacted Union Vice President, Angella Harding, regarding my disability and that I could no longer endure the bad treatment I was experiencing. Ms. Harding advised me not to quit, but instead to take a leave of absence while the issue is ironed out. As a result, my leave of absence commenced on May 28, 2013.

Based on the above, I believe I have been discriminated against in violation of the Americans with Disabilities Act, as amended, and other Federal, state and local anti-discrimination statutes.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY
(month, day, year)

Notary Public - State of New York
NO. 01VI6281324
Qualified in Queens County

7/19/13

Date

x Dellyn D. Graham

Charging Party Signature